Approved For Release 2000/05/03 : CIA-RDP64-00360R000400120088-9

Standard Form No. 1034—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____

Bu. Vou. No. 308

U. S. COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

PAID BY

SAPC 7637
COPY 1 OF 3

THE UNITED STATES, Dr.,

Payee's Account No. 1139

To _____
(Payee)

(Address) (City) (State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		Discount Terms					
		Costs				19,971.	38

PAYMENT:
Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from to Weight Government B/L No. Total $ 19,971.38

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

Differences _____

Amount verified; correct for 19,971 38

(Signature or initials) _____

only)

STATINTL

Date 6-20

Per _____ Title _____

Contract No. A101 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment

†Ap

By _____ 7/12/56 SIGN ORIGINAL ONLY

CONTRACTING OFFICER

Title _____

† _____ 7/12/56
(Certifying Officer)

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

STATINTL

STATINTL

STATINTL

APPROVING OFFICER

STATINTL

Paid by { Check No. _____ dated _____, 19____, for $_____ } { on Treasurer of the United States in favor of payee named above.

Cash, $_____, on _____, 19____. Payee _____
(Sign original only)

By _____

Title _____

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must be stated; thus, "John Doe Company, per John Doe, Secretary" or "Treasurer", as the case may be.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for $_____", and over his official title.

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Standard Form No. 1035a—Revised
Form prescribed by
Comptroller General, U. S.
September 1, 1950
(Gen. Reg. No. 51, Supp. No. 11)

Public Voucher for Purchases and Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. COST REIMBURSABLE (Department, bureau, or establishment) Sheet No. 1 of Bureau Voucher No. 308

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		Contract A101 - System III					
		Direct Costs Properly Chargeable to Contract A101 for the period 6-4-56 thru 6-10-56				STATINTL	
		Labor Week Ending June 10, 1956				[redacted]	
STATINTL		Overhead computed for Communications Division at interim rate of [redacted]					
STATINTL		[redacted]					
		Other Costs - per schedule attached				5,860.86 ✓	
		Total Labor, Overhead and Other Costs				[redacted]	
STATINTL		G and A expense computed at interim rate of [redacted]					
		Total Costs				19,971.38 ✓	
						STATINTL	

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U. S. GOVERNMENT PRINTING OFFICE 16—62665-3

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RW - T1002 (4-66)

☐ CHECK REGISTER
☐ CHARGE DISTRIBUTION CLEARING LIST
☐ DETAIL DIRECT DISTRIBUTION
☐ DETAIL INDIRECT DISTRIBUTION
☐ SUMMARY DIRECT POSTING JOURNAL
☐ SUMMARY INDIRECT POSTING JOURNAL FOR OPERATING DIVISIONS
☐ SUMMARY INDIRECT POST FOR NON-OPERATING DIV

ACCOUN

Ⓢ OK 8773

COST CENTER MAJ	COST CENTER INT	COST CENTER SUB	DATE MO	DATE DAY	DATE YR	CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
25	00	00	06	04	6	50025	E DIETZGEN	E 23214
25	00	00	06	04	6	50025	E DIETZGEN	E 23214
25	20	20	06	06	6	50104	RS ELEC	S 17916
25	00	00	06	04	6	50031	GLIDE EASY	S 27707
25	00	00	06	04	6	50034	LEACH	S 27807

FORM NO. 1421 THE STANDARD REGISTER CO. • PACIFIC DIVISION OAKLAND LOS ANGELES

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ITS PAID

☐ CONSOLIDATED DISTRIBUTION REPORT
☐ ADJUSTMENTS
☐

DATE

PAGE 1

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ISIONS

REPORT NO.

RECEIVING REPORT NUMBER	C.E. CODE	CHARGE DISTRIBUTION ACCOUNT	M.J.O.	S. O.	WORK ORDER	DISTRIBUTION AMOUNT
2530	5	12700	5023			135 77
	5	12700	5023			133 12 -
						2 65 -
						2 65 *
						2 65 * -
22520	5	12700	5023	3		890 99
						890 99 -
						890 99 *
						890 99 * -
3630	5	12700	5023	5		320 15
						320 15 -
						320 15 *
						320 15 * -
4175	5	12700	5023	9		70 56
						70 56 -
						70 56 *
						70 56 * -
			Total page 1			1,284 35
			" " 2			139 76
			Total 5023			1,424 11
			Total 5043 page 3 & 4			4,436 75
				Total		5,860 86

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ACCOUNT

Ⓢ OK 8773

COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
MAJ	INT	SUB	MO	DAY	YR			
25	00	00	06	01	6	50003	BELL	527742
25	00	00	06	01	6	50000	ALLOY SPOT	527597

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